TRANSMITTAL OF INFORMA (Under 37 CF)	11	cket No. 48 PCT 1			
In Re Application Of: HORSTMAN et. al					
Application No. Filing Date	Examiner	Customer No. 00137	Group Art Unit	Confirmation No	
Title: CARBINOL FUNCTIONAL SILIC	CONE RESINS				
	Address to:				
	Commissioner for Paten P.O. Box 1450 Alexandria, VA 22313-14 37 CFR 1.97(b)				
three months of the date of en application; before the mailing	atement submitted herewith is be than a continued prosecution stry of the national stage as set of a first Office Action on the m est for continued examination un	application und forth in 37 CF erits, or before	der 37 CFR 1.53 R 1.491 in an in the mailing of a	B(d); within ternational	
	37 CFR 1.97(c)				
CFR 1.97(b), provided that the Final Action under 37 CFR 1	atement submitted herewith is less information Disclosure States 1.113, a Notice of Allowance in the application, and is accomp	ment is filed be under 37 CFR	efore the mailing 1.311, or an A	date of a	
the statement specified	in 37 CFR 1.97(e);				
	OR				
☐ the fee set forth in 37 CF	FR 1.17(p).				

IAP20 Regid POTATO 15 FEB 2006

TRANSMITT	AL OF INFORMA (Under 37 CF)	ATION DISCLOS R 1.97(b) or 1.97(d		TEMENT	11	cket No. 48 PCT 1
In Re Application	n:	HORSTMAI	Ŋ et. al			
Application No.	Filing Date	Examiner		Customer No.	Group Art Unit	Confirmation N
<u> </u>	FUNCTIONAL SILIC	CONE RESINS		00107		L
The Director as described as described Chapter	the amount of or is hereby authorize	is attached to charge and cre t. t. ee required. PTO-2038 is attached is form may become e credit card inform by Facsimile* tion to charge deposit	dit Deposit d. e public. Conation and	Account No. (Fredit card info authorization rtificate of Mail certify that this co	04-1520 ormation should	ss Mail
	emark Office (Fax. No.)	as first cla for Patent	ss mail in an enve s, P.O. Box 1450, 2/15/06 (Date)	lope addressed to "C Alexandria, VA 22: 	Commissioner 313-1450" [37
	Signature			Ke	Mailing Correspo	
	Printed Name of Person Sig		Тур	ed or Printed Name	of Person Mailing Co	ertificate
deposit acco	eate may only be used unt. M Signature	to	Dated:	Ab 14,	2006	
Patricia M. Scadu Phone: 989-496- Mail Number C01 2200 W. Salzburg P.O. Box 994	232		Custome	rNumber 001:	37	

PTO/SB/08a (08-03)

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INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary) Sheet 1 of 2 Attorney Docket Number Application Number Filing Date First Named Inventor HORSTMAN Art Unit Examiner Name

Examiner	Cite	Document Number	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where
Initials*	No. ¹	Number-Kind Code ^{2 (if known)}	MM-DD-YYYY	Applicant of Cited Document	Relevant Passages or Relevant Figures Appear
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	FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ³ Number ⁴ Kind Code ⁵ (<i>if known</i>)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	Т6	

Examiner	Date	
Signature	Considered	
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Substitute for form 1449/	A/PTO	Co	mplete if Known
		Application Number	AU /208516
INFORMAT	ION DISCLOSURE	Filing Date	
STATEMEN	T BY APPLICANT	First Named Inventor	HORSTMAN
017112111211		Art Unit	
(Use as ma	ny sheets as necessary)	Examiner Name	
Sheet 2	of 2	Attorney Docket Number	DC5148 PCT1

Examiner	Cite	Document Number	U. S. PATENT Publication Date	Name of Patentee or	Pages, Columns, Lines, Where
Initials*	No. ¹	Number-Kind Code ^{2 (if known)}	MM-DD-YYYY	Applicant of Cited Document	Relevant Passages or Relevant Figures Appear
		US- 5,262,507	11-16-1993	Decker et al.	
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		US- 5,290,901	03-01-1994	Burns et al.	
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Examiner Initials*	Cite No.1	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages	6	
Wilder	140.	Country Code ³ Number ⁴ Kind Code ⁵ (if known)		Applicant of Cited Document	or Relevant Figures Appear		
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